

**FOREIGN
LIMITED PARTNERSHIP**

STATE OF MAINE

**CERTIFICATE OF CONFIRMATION
OF REGISTERED AGENT AND
REGISTERED OFFICE**

Filing Fee \$40.00

Deputy Secretary of State

A True Copy When Attested By Signature

Deputy Secretary of State

(Name of Limited Partnership)

Pursuant to 31 MRSA §524.1.C.1.b., the undersigned limited partnership organized under the laws of _____ on
(date) _____ advises you of the following:

The name of the Registered Agent, an individual Maine resident or a corporation, foreign or domestic, authorized to
do business or carry on activities in Maine, and the address of the registered office shall be

(name)

(physical location - street (not P.O. Box), city, state and zip code)

(mailing address if different from above)

GENERAL PARTNER(S)*

(signature)

DATED _____

(type or print name)

For General Partner(s) which are Entities

Name of Entity _____

By _____
(authorized signature)

(type or print name and capacity)

(additional signature may be required on back of form)

THE FOLLOWING SHALL BE COMPLETED BY THE REGISTERED AGENT UNLESS THIS DOCUMENT IS ACCOMPANIED BY FORM MLPA-18 (§494.2-A.).

The undersigned hereby accepts the appointment as registered agent for the above-named limited partnership.

REGISTERED AGENT

DATED _____

(signature)

(type or print name)

For Registered Agent which is a Corporation

Name of Corporation _____

By _____
(authorized signature)

(type or print name and capacity)

*Certificate MUST be signed by at least one general partner (§499.1.).

The execution of this certificate constitutes an oath or affirmation under the penalties of false swearing under Title 17-A, **section** 453.

**SUBMIT COMPLETED FORMS TO: CORPORATE EXAMINING SECTION, SECRETARY OF STATE,
101 STATE HOUSE STATION, AUGUSTA, ME 04333-0101**